



State of Idaho

DEPARTMENT OF WATER RESOURCES

900 N. SKYLINE DR., SUITE A, IDAHO FALLS, ID 83402-1718

PHONE: (208) 525-7161 FAX: (208) 525-7177 WEB SITE: www.idwr.state.id.us

EASTERN REGION

June 10, 2004

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

Bob Duke
PO Box 53
Mackay ID 83251

RE: WATER DISTRICT #34

Dear Bob:

Your CERTIFICATE OF APPOINTMENT is enclosed herewith. You will, therefore, take charge of the waters of such district and distribute the same in accordance with the law and the decrees of the courts to the various users in such district in accordance with the terms and conditions of their respective rights, and perform such other duties as may be required by the Department of Water Resources, under the laws of the State of Idaho. You are hereby requested to assume your duties at once and continue thereat until the necessity therefore shall cease.

Please feel free to call upon this office whenever we can be of assistance to you. We shall have a personal interest in the success of your year's work and desire to keep in as close touch with you as conditions will permit.

Respectfully submitted,

Dennis Dunn
Senior Water Rights Agent

Enclosure

DD:sc

BEFORE THE DEPARTMENT OF WATER RESOURCES
OF THE
STATE OF IDAHO

STATE OF IDAHO

County of Custer

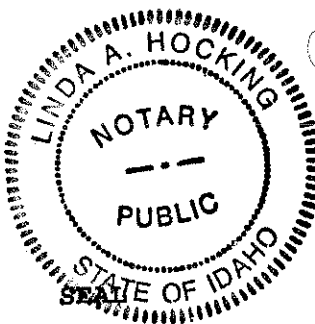
) ss

OFFICIAL OATH

I do solemnly swear (or affirm) that I will support the
Constitution of the United States, the Constitution and laws of
the State of Idaho, specifically including the provisions of
Section 42-605 and 42-607, Idaho Code and that I will faithfully
discharge all the duties of the office of _____
WATER MASTER according to the
best of my ability. So help me God.

Robert E. Hocking
Principal

SUBSCRIBED AND SWORN to before me this 8th day of JUNE,
2004.



Linda A. Hocking
NOTARY PUBLIC

Residing at Mackay, IDCommission Expires 7-18-2006

RECEIVED

JUN 09 2004

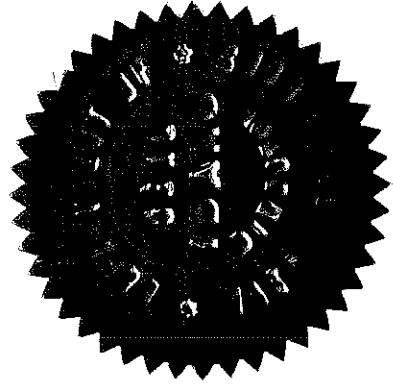
Department of Water Resources
Eastern Region

State of Idaho
Department of Water Resources

Certificate of Appointment

This is to certify that I have on this day appointed ROBERT DUKE as
WATERMASTER of WATER DISTRICT 34 for
FOR THE 2004 IRRIGATION SEASON or until his successor is
appointed and qualified under the provisions of Sections 42-605,
Idaho Code, at such rate of compensation as established by applicable law.

This certificate has been issued and the seal of the
Director affixed at Boise, Idaho, this 10TH
day of JUNE, 20 04.



A handwritten signature in black ink, appearing to be "R. Duke", is written over a horizontal line.

Director

PETITION FOR WATERMASTER'S SERVICES

_____, Idaho
JUNE 8, 2004

RE: Water District No. 34
Stream: BIG LOST RIVER

TO: IDAHO DEPARTMENT OF WATER RESOURCES

I, the undersigned, owner or manager of ditches or person controlling ditches in Water District No. 34, hereby request the services of a watermaster for the reason that there is a necessity for the use and control of the waters of the District.

NAME OF WATERMASTER: ROBERT E. DUKE

ADDRESS OF WATERMASTER: P.O. Box 53

MACKAY, ID 83251

PHONE NUMBER: 208-588-3137

Date watermaster is to start: 3-1-04

If known, the date services of watermaster are to terminate: ~~3-1-04~~

Robert E. Duke signature RT#1 Box 1040 MOORE, ID 83255 address 208-588-3343 telephone

W A R N I N G: Watermaster cannot begin services until ALL conditions of appointment have been fulfilled.

RECEIVED

JUN 09 2004

Department of Water Resources
Eastern Region